

MULTIPLE DEPEN

CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/577954

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			
	IND.		DEP.		IND.			IND.		IND.		DEP.			
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49								98							
50								99							
TOTAL IND.	2							100							
TOTAL DEP.	18														
TOTAL CLAIMS	20														